



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

|   |             |                      |                  |
|---|-------------|----------------------|------------------|
| Substitute for form 1449A/PTO   |             | Complete if Known    |                  |
| <b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br>(Use as many sheets as necessary) |             | Application Number   | 10/053,929       |
|   |             | Filing Date          | January 22, 2002 |
|   |             | First Named Inventor | Julie Straub     |
|   |             | Group Art Unit       | 1617             |
|   |             | Examiner Name        | Edward J. Webman |
| Attorney Docket Number  | ACU 109 CIP |                      |                  |
| Sheet 1   | of 1        |                      |                  |

| U.S. PATENT DOCUMENTS |                       |                    |                                   |   |                                   |
|-----------------------|-----------------------|--------------------|-----------------------------------|---|-----------------------------------|
| Examiner Initials*    | Cite No. <sup>1</sup> | US Patent Document |                                   | Name of Patentee or Applicant of Cited Document | Date of Cited Document MM-DD-YYYY |
|                       |                       | Number             | Kind Code <sup>2</sup> (if known) |   |                                   |
| BF                    |                       | 2002009493         |                                   | Schwendeman, et al.                             | 01-24-2002                        |
| BF                    |                       | 2003035845         |                                   | Zale, et al.                                    | 02-20-2003                        |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |
|                       |                       |                    |                                   |   |                                   |

| FOREIGN PATENT DOCUMENTS |                       |                         |                     |                                   |   |  |   |
|--------------------------|-----------------------|-------------------------|---------------------|-----------------------------------|---|--|---|
| Examiner Initials*       | Cite No. <sup>1</sup> | Foreign Patent Document |                     |                                   | Name of Patentee or Applicant of Cited Document | Date of Publication of Cited Document MM-DD-YYYY | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|                          |                       | Office <sup>3</sup>     | Number <sup>4</sup> | Kind Code <sup>5</sup> (if known) |   |  |   |
| BF                       |                       | PCT<br>WO               | WO 00/61147         |                                   | Southern Research Institute                     | 10-19-2000                                       |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |
|                          |                       |                         |                     |                                   |   |  |   |

|                      |                 |                 |          |
|----------------------|-----------------|-----------------|----------|
| Examiner's Signature | Blessing Fubara | Date Considered | 12-02-05 |
|----------------------|-----------------|-----------------|----------|

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to application.

<sup>1</sup> Unique citation designation number <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commissioner for Patent, Washington, DC 20231.